

*Gibbons (H)*

# ANNUAL ADDRESS

BEFORE THE

# SAN FRANCISCO COUNTY MEDICAL SOCIETY,

DELIVERED PURSUANT TO APPOINTMENT,

JANUARY 27, 1857,



BY HENRY GIBBONS, M. D.

*H. Gibbons*

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## A D D R E S S.

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The Constitution of our Society gives me on this occasion, the dignified title of Orator. If an oration implies a stately production, replete with poetic imagery and lofty diction, the task has fallen into wrong hands. I propose, in a plain and practical manner, to pursue the current of my thoughts and lay before you such topics as may present themselves to my mind.

This body is in the fourth year of its existence, and is now the oldest medical association of a general character in California. Its plan of operations embraces annual reports on all the branches of medical science, and essays and discussions on all topics of professional interest. But I am sorry to say that it has fallen short of its design. We may not have done that which we ought not, but we have certainly left undone that which we ought to have done. Seldom have the members of committees performed the duties allotted to them. The meetings have been thinly attended. To our shame we must confess that the organization has been almost a failure.

The rapid and unexampled progress that has marked the

career of the human mind in the present century, is the result in great measure of associated action. Alone, as individuals, great men may do great things, and write their names on the history of the age in which they live and labor. But as individuals, men of moderate ability, composing the mass of society, are but cyphers. Without association the work of advancement falls on a few: with it, the many are able to make themselves eminently useful.

In no department of human pursuit have the benefits of associated action been more signally displayed than in medicine and the collateral sciences. Especially is this true of our own country. Ten years ago, a congress of physicians assembled in Philadelphia and organized a National Medical Society. From this center went forth with electric speed, a quickening influence, which aroused and embodied the slumbering and isolated energies of the profession. State and County societies rapidly sprang into being, and knowledge immediately began to pour itself in copious streams from sources near and far into the common treasury. The obscure country doctor, for years esconced in one corner of the village tavern, his sanctum adorned with a few antiquated books and bottles, and redolent with anise and musk, awoke from the chrysalis into a more perfect life, swept the cobwebs from his books, hunted up his ink horn, and produced an essay at the county meeting. So at the State Society, men never before heard of in the profession beyond the tracks of their horses' feet, began to cast valuable offerings into the general stock. And then the tables of the National Society were well nigh broken down with contributions from an expanse of territory reaching from the tropic nearly to

the Arctic circle, with mountain and prairie, and forest and marsh, interminably blent, and presenting to the medical profession which occupy it under one national government, a field of investigation unequalled on the globe.

And what is California doing in this noble work ? Has she taken the proper position in the progressive march ? Do her medical practitioners, gathered from the four corners of the earth, appreciate their duties to themselves, to their profession, and to the world ? Do they read, and study, and investigate, as becomes the votaries of science and the guardians of human life ? Or do they slumber at their post, exerting their faculties only by compulsion, when a demand is made for their services ?

It is a common remark that the atmosphere of California is hostile to study. The pursuits and excitements of this land of gold distract and dissipate the powers of the mind. Our people read, it is true, but they require the brief paragraph of the daily press ; and they turn from that with dis-taste if it is not highly seasoned with novelty, extravagance, or abuse. We choose our intellectual food, not for its nutritious qualities, but for its taste. Our choice is controlled by the transient impression on the palate. Even a newspaper paragraph, which cannot be disposed of as quickly as a pinch of snuff, is intolerable.

Our physicians suffer from this habit quite as much as any other class. They are not wanting in education, for they have learned at the best schools in the old and the new world. Nor are they wanting in intellectual power. Perhaps no other country can exhibit such an array of talent. But they lack fixedness in their calling. They are ready for politics

or trade, or anything. They have no patience—I mean the moral quality so named, a very small stock of which has been hitherto imported in this land. They are not anchored in their business. They are not advancing in medical knowledge. They learn little unless by accident or constraint, and they forget faster than they learn. They are adding neither to their own stock of knowledge, nor to the common stock.

This prevailing habit is eminently hostile to the best interests of our profession. Physicians should never cease to be students. The moment they do so, they forfeit all claims to the confidence of the community. It is essential that medicine and the collateral sciences be cultivated by our profession. In every trade and in every art, success depends on the vigilance and promptness with which all improvements are embraced. The practice of the healing art is no exception. On the contrary, the stake that is here at issue—human life itself—imposes obligations stronger an hundred fold. The practitioner that settles down on his reputation, and ceases to be a student, and adds no more to his stock of knowledge, should be driven from the profession in disgrace.

And how shall this evil be remedied but through the power of association? Is it possible to place the medical profession of California on a proper basis without this agency? Will unorganized, individual effort accomplish the great reform which is necessary?

A beginning has been made in this work. The San Francisco County Medical Society claims the honor of leading the way. The Medico-Chirurgical Society of this city, and the Sacramento Medical Society have pressed forward with commendable industry. These were the only general organ-

izations in existence a year since, and from them emanated the call to the Physicians of the State to assemble at Sacramento and form a State Medical Society—or rather to consider the propriety of so doing, for it was not settled that the time had come to carry out that design. But when the day of meeting arrived, one hundred physicians assembled, from all parts of the State, animated with one mind, all intent on organizing the proposed State association. With entire harmony, and under auspices the most cheering, the intention was put in force. A right spirit was diffused abroad, and other County societies have been instituted. We are now on the verge of the second meeting of the State Society.

But it is not enough that associations should exist. They must be sustained and cherished with a vigorous life. It is the duty of every physician to give his aid and co-operation. There can be no good reason for standing aloof. A selfish and exclusive course is unpardonable. You cannot fulfil your obligations to the profession—to the cause of science—to humanity at large—without engaging in the common labor. Are you a laggard? Have you fallen behind the times? Have you suffered your books to moulder on the shelf? And are you conscious of your deficiencies and wants? Then come to school and learn by intercourse with your fellows. If you neglect the golden opportunity, you are the veriest fool in the family of Esculapius, and deserve to be scourged from the temple.

But on the other hand, if you have not slumbered in your office—if you are posted in all the improvements and discoveries—if your duties to yourself are performed, and you are

qualified to discharge all the duties to your patients, then the Commonwealth of Medicine has the strongest claims on your service. You are the very man for the work. Your selfishness is an offence against humanity—it is a crime.

Nor should it suffice to enroll your names on the records of a Medical Society and to acquire a nominal membership. We want no drones in the hive. A certain valuable book speaks of several women laying hold of one man, saying “we will eat our own meat and wear our own apparel, only let us be called by thy name to take away our reproach.” A compact like this appears to be proposed by many physicians on joining a medical association. They would have it known that their parchment is genuine—that they are M. D. of right; and this is the sum of their aspirations. They contract no obligation—they propose no benefit to others. All they seek is the name and the honor, to take away a reproach which they really deserve.

It is probable that medical societies all over the world have the same difficulties to encounter. An exclusive disposition, or personal antipathies and jealousies, deter some individuals from joining. Of the members, a large proportion are drones, never attending a meeting, or coming only to participate in an election or a quarrel. An organization composed mainly of such members had better give up the ghost than prolong an existence of alternate coma and convulsion.

In no other country is association so essential to the interests of the profession as in California. We occupy a new field of labor—new in its climate, and new to some extent in the types and modifications of disease. Our former knowledge and experience will not avail us fully. We have more to

learn before we can be properly qualified for the grave responsibilities of our calling. This additional knowledge, adapting us to our new field of labor, may be gathered gradually, by individual effort, at some expense to our patients. But it may be acquired much more speedily through associated enterprise, whereby the observations and experience of each become the property of all. In this point of view the organization and sustentation of medical societies in every practicable locality, becomes an imperious duty.

Another inducement to association, which applies to California with much greater force than to any other country on the globe, is the heterogeneous character of the members of the profession. Where on the face of this earth can be found a body of Medical practitioners, gathered from so many climes and nationalities, and differing so widely in every feature of mind? By familiar, social and professional intercourse, these discordant materials will become assimilated, and the confusion of tongues will be an element of strength.

The world considers us a quarrelsome tribe. "When do you hear one Doctor speak well of another?"—is a question which occasionally grates on our ears. I should like to contradict the charge, but I fear there is too much truth in it. Poets may no longer monopolise the title of "genus irritable." There are a thousand vexations incident to our occupation, calculated to fret the temper and to foment ill feelings. Physicians are daily brought in collision with each other. Temptations are continually presented to induce one to take advantage of another. Suspicion, and envy, and jealousy, crowd themselves into the heart. Such is the general tendency; and a great degree of forbearance and magnanimity

is necessary to resist the consequences. Here the beneficial influence of association is powerfully felt. Nothing tends so much to dispel prejudice, to remove asperities and jealousies, and to prevent contention and bickerings. "As iron sharpeneth iron, so doth the countenance of a man his friend." But if the countenance be steadily averted, there can be no bond of union. Personal intercourse among physicians can not be too free. Distrust is often converted into friendship merely by acquaintance. Frequent meetings cherish sentiments of respect and attachment, and preclude annoying suspicions and cankering jealousies.

I cannot imagine a more comfortless and wretched life than that of the Ishmaelite, who secludes himself from association with his fellows, and regards their interests adverse to his own—in short, who treats them as rivals and enemies. Suspicious and sensitive and jealous, he is ever on the watch for offences, and of course he finds them. Every practitioner is a rival, and the success of any one torments him. Even the mention of another's name calls for an invidious or sneering remark. The whole course of his professional life is a round of anxiety and vexation, and not a ray of genial sunshine breaks in upon his cold and dreary path.

Surely we suffer enough of annoyance in the proper pursuit of our business, without adding to our troubles by cherishing such feelings. The ingratitude and ill usage of patients, especially of those who receive our gratuitous services, or who cheat us out of our pay, and the officious interference of their friends in thrusting forward their own favorite doctors, and a multitude of similar vexations that beset us in our daily walks, occasion enough of discomfort

and draw sufficiently on our forbearance. But all these trials are wonderfully mitigated by the cultivation of social and kindly feelings towards our brethren. It is a substantial solace to escape from such unmerited suffering, to enjoy the society of our fellows and feel that they are friends and brothers, and to cast our interests and sympathies into a common lot. Depend on it, he who makes friends and companions of his confederates, who seeks their society in the social circle and in the Medical association, fortifies himself against the irritants that beset his path, and enjoys a much larger share of happiness than the reserved, unsocial, suspicious, censorious and pragmatic physician.

Experience has everywhere demonstrated the necessity of establishing for the government of practitioners in every town or neighborhood, a code of laws to regulate their relations one to another. It is probable that in the United States greater attention has been directed to this subject than in other countries. A rigid compliance with such a code is essential to the harmony and prosperity of the profession. But it is only through the means of association that it can be enforced. Even here, in San Francisco, with all the advantages of two Medical Societies, how small a proportion of physicians are conversant with their prescribed duties one towards another, and how much smaller is the number of those who are scrupulous in observing them! Especially is it needful that consultations be conducted in proper form; and yet I apprehend but few even of our best trained physicians observe the rules in this respect.

Want of time is often alleged as an excuse for standing aloof from Medical Societies, or for absence from the meet-

ings and omission of the attendant duties. Perhaps there is no expression in our language so commonly devoid of truth as the phrase asserting want of time. Men in all positions of life and in all circumstances, are in the habit of excusing themselves from every duty by the same universal lie. We shall discover on looking around us, that the complaint is most common in the mouths of those who waste their time in idleness or pleasure, whilst men of industry have time for almost every thing. The most voluminous and valuable medical works are from the pens of authors actively engaged in the practice of our art. You will find that the Professor who lectures daily to his classes, who attends to a large circle of patients, and who composes elaborate text books, always has time to take his place in the meetings of the Medical Society. Let me instance, without going beyond the limits of a single city, Professors Wood, Meigs, and Dunglison,—names familiar to the world. We may say of time what the Book says of another description of treasure : “To him that hath shall be given, and from him that hath not shall be taken away, even that which he hath.”—Active, energetic business men have time for every thing ; idlers, for nothing.

To maintain the firm, and lofty, and dignified position that our profession should occupy in the public mind, and to protect itself efficiently from the specious claims and attractions of quackery, in its varied forms, from the novel and poetic systems of quasi scientific men, to the mendacious and obscene pretensions which defile the columns of the daily press, we have need of all the strength that harmony, union and co-operation can impart. A constant and efficient *esprit de*

*corps* is greatly wanting among us. The reputation of every practitioner is two-fold—one portion earned by himself, the other consisting of his dividend from the common stock. While building up an individual character, it is his highest interest to aid in elevating the character of the profession in general. In their private family relations, men carry out this principle with scrupulous attention. If one member of the household take a wrong step, involving himself in dis-honor, all the others strive to conceal the offense or apologise for it, in order to avoid their share of the reproach. So let it be in the family of Medicine. Instead of exposing a brother and holding him up to public reprobation, selfishness itself would teach us to cover him with the mantle of charity, and hide his shame from the world. I need not remind you that every honorable, generous and noble impulse would lead to the same course of action.

I have now mentioned some of the advantages to be derived from Medical Associations. The subject is by no means exhausted, but I must leave it, with the remark that, while there is no country on earth where physicians have so much to gain by association, there is none where the interests of science and the welfare of society so imperatively demand their organized and united labor.

Permit me now to suggest some topics of enquiry possessing claims on the Medical Profession of California, and the further neglect of which would entitle us to censure, if not to opprobrium.

In the diversified and exuberant growth of vegetation peculiar in a great measure to this section of the Western coast of North America, there lies hid an extensive Medical Flora,

the investigation of which is not likely to be accomplished by individual effort. I do not know of a single indigenous plant in common use as a medicine. And yet our plains and forests are covered with species possessing active sensible qualities, and doubtless imbued with valuable therapeutic virtues. And whilst our climate perfects their growth and development, it offers facilities for collecting and preserving them, not to be found elsewhere. With aromatic plants in remarkable variety and abundance, almost at the door of every house, we depend exclusively on the *Nepeta* and *Mentha* prepared in the uncertain climate of New Lebanon, and then transported by sea a distance equal to half the circumference of the globe, and twice traversing the tropics. The same may be said of the more important medicinal herbs. And here let me remark that many of the drugs sold in our shops have been seriously injured, if not rendered entirely inert, during their transportation. I have more than once obtained powder of *Ipecacuanha* which was nearly worthless, from this cause. In fact, so uncertain was the quality of many articles found in the market some years ago, as to induce me to supply myself with such as I knew to be active and to dispense them in important cases, rather than depend on the chances of a written prescription. Of latter years there is more care exercised by druggists. But room for improvement still exists. It is a subject which, in connection with the heinous practice of adulterating drugs, should never for a moment be allowed to escape the notice of medical practitioners.

One of our common plants is a species of *Echynocystis*, sometimes called Wild Cucumber from the resemblance of

its vine to that of the Cucumber. The root, which grows in the sand to the size of a man's body, is a remarkably pungent bitter, and was used in the early settlement of this country, by some enterprising druggists, in the manufacture of Stoughton's Bitters. With the exception of some experiments in the treatment of Intermittent Fever, in which it proved successful—experiments made by my brother, Dr. W. P. Gibbons, in the County Hospital,—I do not know that its medicinal qualities have been applied to any other use. There is a Helenium growing in Alameda County, of most intense bitterness, which I have no doubt would prove valuable. The same may be said of other plants, especially those of resinous and balsamic properties, which exist in great abundance.

Our thermal and mineral springs too, should be explored. They are found in every direction—in Napa Valley and northward, Sulphur waters, varying from blood heat to the boiling point—in the Valley of Santa Clara and elsewhere, Seltzer or Carbonated springs with magnesia and saline matters in solution—and chalybeate waters, profusely distributed in the Alameda hills and the Coast Mountains to the eastward. The Carbonated springs of New Almaden, located in a picturesque country beyond the Valley of Santa Clara, cannot be excelled in any part of the world. The warm Sulphur springs which abound in the lovely valley of Napa, have already attracted the attention of invalids, and are the fashionable watering place of California. And the Geysers, a short distance from the head of that valley, possess attractions alike for the man of science, the lover of romance in nature, and the valetudinarian, which will make them event-

ually the most popular resort in California. All these localities are within the range of the Bay climate, and in summer are fanned gently and voluptuously by the sea winds, which rush upon us, in San Francisco, with such chilling force.

The climate of the Pacific Coast, in its Etiological relations, opens an immense field of observation and study. In the winter season, if winter it can be called, from November to April inclusive, there is but little difference on the sea board in a range of fifteen degrees, from the mouth of the Columbia River on the north, to San Diego on the south. Nor is there much difference inland, except that the more elevated regions are liable to colder weather. Thus whilst snow and ice are rarely seen on the coast, the mountains of the Sierra Nevada range are covered with snow nearly all the year.

In the summer season, a similar uniformity of climate presents itself on the sea board ; but during this period, from May to October, a wave of cold air flows daily from the ocean, often loaded with falling mist. So little difference is there in temperature between winter and summer in this wide range of coast, that flannel garments are constantly worn, and no one thinks of changing the dress from winter to summer.

But beyond the mountain barrier, which skirts the ocean and walls out the sea breeze from the interior, the heat of summer is often intense, the mercury rising frequently to 100 degrees, or upwards. At the same time the air is generally very dry. Almost invariably, however, the nights are pleasantly cool, so that sleeping is well done everywhere.

A few years ago it was supposed that the climate of California was almost proof against Pulmonary disease. In 1850, if an individual happened to cough in church, all eyes were turned on him with curiosity and amazement. The native population, it was said, were entirely exempt from disorders of the lungs. But time has dispelled the delusion, and Pulmonary Consumption and the kindred affections, have become the great enemy of human life, as in the Atlantic States. Our entire climate everywhere, is less injurious to pectoral disorders than the corresponding latitudes on the Atlantic. But the cold and searching winds of summer on the sea board, while they often build up the strength by their bracing and tonic power, are in general, unfavorable to patients suffering from the class of maladies under consideration. And the extreme heat of the interior is equally noxious, from its debilitating influence.

The relation of our climate to this class of diseases, may be summed up in a few words. Persons afflicted with bronchial or pulmonary disorders, in the incipient stage, are almost invariably benefitted, and oft times cured by traversing a tropical climate and taking up their abode in California. On the other hand, such diseases are developed *ab initio* in this country, about in the same degree as in the Atlantic States. As the female population increases, the bills of mortality exhibit a corresponding increase in the number of victims.

Some years ago, it was a general practice to send pulmonary cases to the Sandwich Islands. But experience has shown its futility. We stand in need of some other Sanitarium. In many cases, change of climate is the only remedy ;

and a genial temperature, not liable to sudden or material fluctuations, and exempt from strong winds, are requisite conditions. In the summer season, the region bordering on the Bay, at its northern and southern extremities, may serve the purpose; holding as it does a medium place between the damp and chilly ocean climate of San Francisco, and the arid and scorching heat of the interior. In the winter, we must turn our attention to the South. Los Angeles and San Diego, in the southern section of the State, are still too far north. The table land of Mexico will probably supply the desideratum. But even in Mexico, proximity to the ocean must be avoided. Twelve months ago, in a brief stay at Manzanillo, which is on the Western Coast, in latitude 19 deg., I observed among the native population, an extraordinary prevalence of pulmonary disease; caused in all probability by their sleeping on the damp ground, exposed more or less to the cool night wind. Sixty or seventy miles inland, in the vicinity of Colima, is a different climate, said to be much more salubrious. With all the knowledge I now possess on the subject, this spot appears preferable to any other; and accordingly I have latterly recommended it to my patients, instead of the Sandwich Islands. This subject, however, deserves much more consideration than it has yet received.

If important advantages are to be gained by change of climate in pulmonary subjects, the change must be made at an earlier stage than is common. In the majority of cases, the patient defers until no reasonable hope of recovery exists; and then he goes abroad to die. I believe that in the greater number of instances, the timely application of this remedy,

if not adequate to a complete cure, will add from ten to twenty years to the duration of life.

Much has recently been written in favor of the direct application of remedies to the bronchial and pulmonary surfaces, by inhalation. But inasmuch as the mode of treatment has been taken up as a speciality, and by outsiders, it is regarded by our profession with distrust and hostility. Being a subject of rational experiment and investigation, it is simply absurd that we should allow ourselves to be turned away from it by prejudice. The direct application of medicines to diseased surfaces, when possible, is not only of universal practice, but constitutes an essential part of the treatment. We pry into all the orifices and cavities of the body, and thrust in our various appliances. The ear, the throat, the æsophagus, the rectum, the urethra, the uterus, are all treated with topical applications. We even go into the larynx with sponge and caustic. But all beyond that point is forbidden ground. Why should not the diseased surface of the bronchial tubes, and of the air cells, be sensible to the direct contact of medicines in the form of vapor? What is there irrational in the idea? Do we not apply the vapor of water to the fauces in tonsillitis and other affections? Do we not apply carbonic acid gas, through the fermenting poultice, to diseased surfaces, thus excluding oxygen and substituting its opposite?

The most effectual means that I have ever employed to relieve the distressing paroxysm of Asthma, is the popular remedy of brown paper and nitre, which is burnt, and the fumes inhaled. Why may not iodine and other vegetable agents be applied in a similar manner—not only to act on the respi-

ratory surfaces, but to pass through this channel into the blood, without disturbing the stomach ?

Many years ago, the inhalation of oxygen gas was promulgated as a cure for Pulmonary Consumption, by Dr. Beddoes and others. But it was soon abandoned. The vapor of the Sugar House has performed some wonderful cures in modern times. Physicians have not disdained to use these remedies. Dr. Clutterbuck ventured to extend the range of inhalation, on strictly scientific principles, but he almost lost caste by the operation. In a class of diseases, acknowledged as the opprobrium of the profession—more fatal and more incurable than any other—whose victims are fearfully numerous, and mostly in the flower of life, and composed of the fairest and brightest of our friends and kindred, let us, rather than turn away our faces, encourage every endeavor to devise remedies and palliatives. Even if such endeavors prove futile, we gain a negative knowledge not destitute of value.

Epidemics are of rare occurrence in this State. At an early period, when the comforts of life were greatly wanting, Diarrhea and Dysentery were prevalent, and extremely fatal. In those days men dwelt in tents and slept on the earth ; they used a diet of animal food, almost exclusively, undiluted with vegetables and fruits, and composed of beef run down before killing ; and they employed that blessed prophylactic, brandy. With improved habits of life, and wholesome diet, and a diminished antipathy to the internal use of cold water, those diseases have greatly diminished, and death from Dysentery or Diarrhea, is comparatively rare.

In the winter of 1850-51, the Malignant Cholera was epidemic in various localities, visiting our territory in its regular course of march on the Western Coast of North America. In this city the mortality was light, but Sacramento was nearly depopulated. Since that time, sporadic cases have occasionally appeared, and patients laboring under the malady, and dying with it, have been frequently landed from the steamships from Nicaragua and Panama, and taken to the County Hospital, or otherwise disposed of. But the disease has, in no well authenticated instance, extended to others. Several cases were said to have appeared in the neighborhood where the clothing from the infected vessel was sent to be cleansed—giving support to the theory which attributes the spread of Malignant Cholera to exhalations from the feces of its victims. But as the statements to that effect were connected with some pecuniary interests or speculations, they are not entitled to credit.

In June and July, 1851, bronchial affections first made their appearance in San Francisco, in the form of an influenza. Since that date, catarrhal disorders have prevailed nearly every summer, in a sufficient degree to be pronounced epidemic.

Whooping Cough prevailed to some extent in the summer of 1856, in San Francisco, and a few other localities. It was unusually severe and fatal.

Croup is a disease from which the infantile population of our State suffer very much. It is apt to be violent and intractable, terminating fatally in many cases, perhaps as much for want of timely medicine and proper nursing as from the intrinsic violence of the malady.

In the summer of 1856, simultaneously with Whooping Cough and Croup, measles appeared, to a limited extent.

Scarlatina first presented itself to the notice of the American inhabitants in the spring of 1851, on the heels of the cholera. There were few cases however, and they were of mild grade. Since that time it has occurred sporadically, and with the same tractable character.

There is a form of disease bordering on Malignant Scarlatina, which has committed sad havoc in certain localities in the past two or three years. It commences with inflammation, and mostly ulceration, of the fauces and tonsils, exhibiting no peculiar features, and exciting no alarm. Sometimes a cough is present from the beginning. Suddenly the patient is seized with croupy symptoms, and in a brief period, from six to twenty-four hours, life is extinguished. The muscular strength and the faculties of the mind are generally retained to a late period. The pulse is that of Scarlatina, but there is no eruption. Delirium and convulsions seldom occur. Children are its ordinary victims, though adults are not always exempt.

A striking feature of this malady, is its fatality in certain families. It may visit only a few houses in a village or neighborhood, but in them it is apt to carry off all the young children, in rapid succession. In San Francisco, it has not prevailed so much as in Oakland, Sonoma, and some other towns. In the only instances within my knowledge, in this city, where all, or nearly all the children of the household were swept away, the victims were trophies of Homœopathic practice. I have had no fatal, and no very malignant cases, in my own charge exclusively, but have visited a number in

this city, and at a distance, in consultation, where no opportunity was afforded for autopsic examination. In these cases the fatal result appeared to arise from the rapid extension of the inflammation to the air passages and lungs, without a full development of the proper symptoms. The treatment that has proved most salutary under my observation, consists mainly of the free internal use of Quinia, and the application of Nitrate of Silver, in solution, to the fauces, with a large blister on the chest in case of pneumonia. I am constrained by the narrow limits of this address, to hasten thus briefly over a subject which we are required, by the interests of humanity, as well as by the character of our Profession, thoroughly to investigate.

Diseases of the urinary passages are frequent and troublesome, especially chronic affections of the Urethra, which often defy all treatment, yielding only to time. In fact it may safely be said, that an unusual tendency exists on this coast to disorders of the mucous membranes in general.

Insanity, as might be expected, is fearfully prevalent in California. It grows directly out of the excited mental condition of our population, to which the common use of alcoholic drinks, is a powerful adjunct. Other cerebral disorders do not abound—excepting meningitis in infants. It has been remarked that, notwithstanding the constant exposure of a large portion of the male population to the extreme heats of the interior, “sun stroke” is scarcely ever heard of.

Derangements of the Uterus and its appendages are very frequent. The moral relations of the sex in this country tend to produce an undue excitement of the uterine system. California babies are noted for their magnitude, and couplets

are common. Abortions are of frequent occurrence, and still born children and sudden deaths of mothers in childbed. Nervous disorders of all descriptions, are painfully numerous among females.

Erysipelas and ophthalmitis are prevalent, especially in the mining region, where the former is often endemic. Cutaneous disorders abound, and are frequently intractable. Syphilis, primary and secondary, assumes an endless variety of forms, not unfrequently resisting the most vigorous treatment. Old cases, supposed to have been cured, are revived in our climate. Rheumatism abounds, mostly in a sub-acute or chronic form, and is eradicated with difficulty. Gout is almost unknown, while neuralgic ailments are popular.

There has been observed in the diseases of this coast, an extraordinary tendency to the paroxysmal form, or to exacerbations, requiring the use of Quinia. This occurs in Dysenteries, in Pneumonia, in Puerperal women—in short it is traced in almost every affection attended with febrile action.

Fevers to which the dubious term Malarious is conveniently applied, are scattered everywhere, in city and country, and are often endemic in certain districts. In the intermittent phase, they are often excessively annoying by their repeated returns after apparent cure. Typhoid, or rather Ataxic fevers, are ~~not~~ frequently met with.

Acute inflammations, requiring the lancet, are not common. It is truly singular to what extent venesection is discarded in California. I am apprehensive that we allow this potent remedy to be too much neglected.

But I must detain you no longer, though there are other topics which want of time forbids me even to mention. My remarks have been brief and superficial, from necessity. But should they serve in some degree to excite inquiry and direct into channels of investigation and study, and to promote the spirit of association, I shall be more than satisfied.